FORM D

UNITED STATES SECURITIES AND EXCHANGE COM Washington, D.C. 20549

NOTICE OF SALE OF SEPURSUANT TO REGUL SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

132	5063
OMB AP	PROVAL
OMB Number:	3235-0076
Expires: Ap	ril 30.2008
Estimated ave	rage burden
hours per resp	onse 16.00

SEC USE ONLY					
Prefix		Serial			
DA	TE RECEIV	ED			
		l			

Type of Filing: New Filing Amendment  A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Nobska Venture Partners I, LP	
Address of Executive Offices (Number and Street, City, State, Zip Code) 10701 Greenspring Avenue, Lutherville, MD 21093	Telephone Number (Including Area Code) (410) 486-1848
Address of Principal Business Operations (Number and Street, City, State, Zip Code (if different from Executive Offices)  Same	Telephone Number (Including Area Code) Same
Brief Description of Business Venture Capital Investment	PROCESSED
Type of Business Organization  corporation  business trust  limited partnership, already formed  limited partnership, to be formed	(please specify): EMAY 072008
Month Year  Actual or Estimated Date of Incorporation or Organization: 02 05 Actual Es  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for Sta	THOMSON REUTER

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five. (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## - ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA							
2. Enter the information requested for the following:							
• Each promoter of the issuer, if the issuer has been organized within the past five years;							
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer							
• Each executive officer and director of corporate issuers and of corporate general and managing p	artners of partner	ship issuers; and					
Each general and managing partner of partnership issuers.							
		<u> </u>					
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director 🚺 (	General and/or Managing Partner					
Full Name (Last name first, if individual)  Nobska Ventures Management I, LLC							
Business or Residence Address (Number and Street, City, State, Zip Code) 10701 Greenspring Avenue, Lutherville, MD 21093							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer I	Director []	General and/or Managing Partner					
Full Name (Last name first, if individual)  Moore, Charles P.							
Business or Residence Address (Number and Street, City, State, Zip Code)							
10701 Greenspring Avenue, Lutherville, MD 21093							
	Director	General and/or Managing Partner					
Full Name (Last name first, if individual) Moore, Laura M.							
Business or Residence Address (Number and Street, City, State, Zip Code)		· · · · · · · · · · · · · · · · · · ·					
10701 Greenspring Avenue, Lutherville, MD 21093							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer I	Director [	General and/or Managing Partner					
Full Name (Last name first, if individual)							
Rosenbaum, Robert A							
Business or Residence Address (Number and Street, City, State, Zip Code) 10701 Greenspring Avenue, Lutherville, MD 21093							
Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  I	Director	General and/or Managing Partner					
Full Name (Last name first, if individual) Ward, Michael R.							
Business or Residence Address (Number and Street, City, State, Zip Code) 10701 Greenspring Avenue, Lutherville, MD 21093							
Check Box(es) that Apply: Promoter  Beneficial Owner  Executive Officer  I	Director [	General and/or Managing Partner					
Full Name (Last name first, if individual) Nobska Ventures Investor LLC							
Business or Residence Address (Number and Street, City, State, Zip Code) 5 Farringdon Court, Baltimore, MD 21209							
Check Box(es) that Apply: Promoter  Beneficial Owner  Executive Officer  I	Director [	General and/or Managing Partner					
Full Name (Last name first, if individual)							
Trisun Financial Group LLC							
Business or Residence Address (Number and Street, City, State, Zip Code) 1777 Reisterstown Rd., Suite 135 East, Pikesville, MD 21208							
(Use blank sheet, or copy and use additional copies of this sheet, as	necessary)						

	B. INFORMATION ABOUT OFFERING												
,	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?						Yes	No <b>⊻</b>					
i.	Answer also in Appendix, Column 2, if filing under ULOE.						Ľ						
2.							\$	··					
												Yes	No
3.			permit join										
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Ful	l Name (	Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (N	lumber and	l Street, C	ty, State, Z	ip Code)						
Naı	me of Ass	sociated Bi	oker or De	aler				•					
Sta			Listed Has										
	(Check	"All States	" or check	individual	States)	***************************************	,,,,,			••••		☐ Al	1 States
	AL IL MT RL	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
						01							
Ful	ll Name (	Last name	first, if ind	iviđual)									
Bu	siness or	Residence	: Address (1	Number an	d Street, C	City, State, 2	Zip Code)						
Na	me of As	sociated B	roker or De	aler			<del></del>				-		
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	(Check	"All State:	s" or check	individual	States)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		·····		☐ AI	1 States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	MA ND WA	FL Ml OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	ll Name (	Last name	first, if ind	ividual)				<del></del>	-				
Bu	siness or	Residence	: Address (l	Number an	d Street, C	City, State, 7	Zip Code)		<del></del>				
Na	me of As	sociated B	roker or De	aler									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)								☐ Al	1 States				
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
		Aggregate Offering Price	Amount Already Sold
	Debt	•	•
	Equity		
	Common Preferred	<u> </u>	
			c
	Convertible Securities (including warrants)		
	Partnership Interests		
	Other (Specify)		
	Total	40,000,000.00	\$ 7,500,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	37	\$ 7,300,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		s
	Legal Fees		\$_100,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify)	_	\$
	Total		\$ 100,000.00

	C. OFFERING PRICE, NUMI	BER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."			\$
5.	Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		\$ 8,686,869.00	<b>□\$</b>
	Purchase of real estate	<del>-</del>	=	· <del></del>
	Purchase, rental or leasing and installation of mac	hinery		_
	Construction or leasing of plant buildings and faci	ilitics	 \$	\$
	Acquisition of other businesses (including the value offering that may be used in exchange for the asset	ts or securities of another	¬ c	e
	issuer pursuant to a merger)	_	<del></del> '	
	Repayment of indebtedness			
	Other (specify):	L	_  \$	□ 2
		[	<b></b>	\$
	Column Totals	[	\$ 8,686,869.00	\$ 31,213,131.
	Total Payments Listed (column totals added)		\\$ <u></u> 39,	900,000.00
	·	D. FEDERAL SIGNATURE		,
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acci	nish to the U.S. Securities and Exchange Commis	sion, upon written	
 Iss	uer (Print or Type)	Signature	Date	
	obska Venture Partners I, LP		April 22, 2008	
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)		
La	ura M. Moore	Managing Member of the General Partner, No	bska Ventures M	anagement I, LLC

**END** 

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)